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PTO/SB/01 (10-00)

11. *Phragmites australis* (Cav.) Trin. ex Steud. (Common reed)

#3

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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

Declaration Submitted with Initial Filing       Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)  
OR

Attorney Docket Number	502P57US-1
First Named Inventor	Davari
<b><i>COMPLETE IF KNOWN</i></b>	
Application Number	10 / 058,776
Filing Date	Jan 30, 2002
Group Art Unit	2817
Examiner Name	

**As a below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

## FEEDBACK PRIORITY MODULATION RATE CONTROLLER

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY)

January 30, 2002

as United States Application Number or PCT International

(if applicable)

Application Number 10/059 776 and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

CertIFICATE, OR ANY PCT INTERNATIONAL APPLICATION, HAVING A FILING DATE BEFORE THAT OF THE APPLICATION, FOR WHICH PRIORITY IS CLAIMED.				
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/265,105	01/31/2001	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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PTO/SB/01 (10-00)

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## DECLARATION — Utility or Design Patent Application

Direct all correspondence to:  Customer Number \_\_\_\_\_ OR  Correspondence address below

Name **Shapiro Cohen**Address **P.O. Box 3440**Address **Station D**

City <b>Ottawa</b>	State <b>ON</b>	ZIP <b>K1P 6P1</b>
--------------------	-----------------	--------------------

Country <b>Canada</b>	Telephone <b>613-232-5300</b>	Fax <b>613-563-9231</b>
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**NAME OF SOLE OR FIRST INVENTOR:**  A petition has been filed for this unsigned inventor

Given Name (first and middle [if any]) <b>Shahram</b>	Family Name or Surname <b>Davari</b>
--	---

Inventor's Signature <b>Sh. Da</b>	Date <b>17/4/2002</b>
---------------------------------------	-----------------------

Residence: City <b>Kanata</b>	State <b>Ontario</b>	Country <b>Canada</b>	Citizenship <b>Canada</b>
-------------------------------	----------------------	-----------------------	---------------------------

Mailing Address <b>271 Knudson Drive</b>
--

Mailing Address	City <b>Kanata</b>	State <b>Ontario</b>	ZIP <b>K2K 2N8</b>	Country <b>Canada</b>
-----------------	--------------------	----------------------	--------------------	-----------------------

**NAME OF SECOND INVENTOR:**  A petition has been filed for this unsigned inventor

Given Name (first and middle [if any]) <b>Heng</b>	Family Name or Surname <b>Liao</b>
---	---------------------------------------

Inventor's Signature <b>Heng</b>	Date <b>March 12, 2002</b>
-------------------------------------	----------------------------

Residence: City <b>Burnaby</b>	State <b>B.C.</b>	Country <b>Canada</b>	Citizenship <b>China</b>
--------------------------------	-------------------	-----------------------	--------------------------

Mailing Address <b>1208-3970 Carrigan Court</b>
---

Mailing Address	City <b>Burnaby</b>	State <b>British Columbia</b>	ZIP <b>V3N 4S5</b>	Country <b>Canada</b>
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Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

[Page 2 of 2]

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P.007



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PTO/50402A (11-00)

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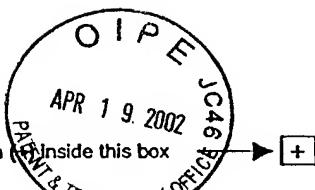
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**DECLARATION****ADDITIONAL INVENTOR(S)**  
Supplemental Sheet  
Page \_\_\_\_\_ of \_\_\_\_\_

<b>Name of Additional Joint Inventor, If any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned Inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Stacy William		Nichols	
Inventor's Signature		Date April 17	
Residence: City	Kanata	State	Ontario
Country	Canada	Citizenship	Canada
Mailing Address 23 Brodeur Crescent 1536 (Land) Dr			
Mailing Address K2B 1C5			
City	Kanata	State	Ontario
ZIP	K2B 1Z2	Country	Canada
<b>Name of Additional Joint Inventor, If any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned Inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country
<b>Name of Additional Joint Inventor, If any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned Inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

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PTO/SB/81 (10-00)

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## POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	10/058,776
Filing Date	Jan 30, 2002
First Named Inventor	Davari
Group Art Unit	2817
Examiner Name	
Attorney Docket Number	502P57US-1

I hereby appoint:

Practitioners at Customer Number

\_\_\_\_\_

Place Customer  
Number Bar Code  
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OR

Practitioner(s) named below:

Name	Registration Number
Harold C. Baker	19333
Robert A. Wilkes	28170
Robert G. Hendry	22927

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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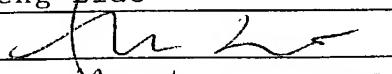
<input checked="" type="checkbox"/> Firm or Individual Name	Shapiro Cohen			
Address	P.O. Box 3440			
Address	Station D			
City	Ottawa	State	ON	Zip K1P 6P1
Country	Canada			
Telephone	613-232-5300	Fax	613-563-9231	

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

### SIGNATURE of Applicant or Assignee of Record

Name	Heng Liao	
Signature	X	
Date	X	March 12, 2002

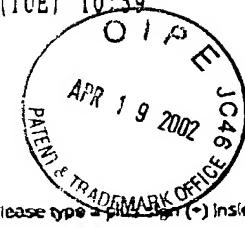
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\*Total of 3 forms are submitted.

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PTO/SB/81 (10-00)

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POWER OF ATTORNEY OR  
AUTHORIZATION OF AGENT

Application Number	10/058,776
Filing Date	Jan 30, 2002
First Named Inventor	S. Davari
Group Art Unit	2817
Examiner Name	
Attorney Docket Number	502P57US-1

I hereby appoint:

 Practitioners at Customer Number

OR

 Practitioner(s) named below:

Name	Registration Number
Harold C. Baker	19333
Robert A. Wilkes	28170
Robert G. Hendry	22927

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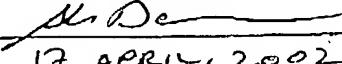
OR

<input checked="" type="checkbox"/> Firm or Individual Name	Shapiro Cohen			
Address	P.O. Box 3440			
Address	Station D			
City	Ottawa	State	ON	Zip
Country	Canada			
Telephone	613-232-5300	Fax	613-563-9231	

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Shahram Davari		
Signature			
Date	17 APRIL 2002		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

 Total of \_\_\_\_\_ forms are submitted.

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AUTHORIZATION OF AGENT

Application Number	10/058,776
Filing Date	Jan 30, 2002
First Named Inventor	S. Davari
Group Art Unit	2814
Examiner Name	
Attorney Docket Number	502P57US-1

I hereby appoint:

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Practitioner(s) named below:

Name	Registration Number
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Robert A. Wilkes	28170
Robert G. Hendry	22927

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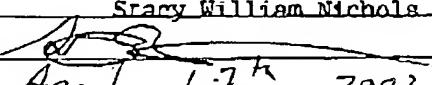
<input checked="" type="checkbox"/> Firm or Individual Name	Shapiro Cohen			
Address	P.O. Box 3440			
Address	Station D			
City	Ottawa	State	ON	Zip
Country	Canada			
Telephone	613-232-5300	Fax	613-563-9231	

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

## SIGNATURE of Applicant or Assignee of Record

Name Stacy William NicholsSignature Date April 17<sup>th</sup> 2002

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